

### State of South Dakota Campaign Finance Disclosure Statement

Full Name of Committee: South Dakota Company	for Healthy Families Ballon ausen Comittee
Cascy Murschel Cmursc Committee Chair, Treasurer, Candidate E-Mail	hel @sio, midco.net
4320 S. Lowise Ave. Stc. 201 Siany F.	Falls, SD 57106
PO Bux 1484 Slaux Falls, SD Scommittee Postal Address	57101
Casey Murschel Go 5 · 3  Name of Person Making Report Daytime Tele	ephone # Evening Telephone #
If Candidate Committee, please note office being sought, and District # (If applicable)	Political party affiliation (if any)
If Ballot Question Committee, Ballot Question number or letter.	Supporting? Opposing?
Type of Campaign Statement:  Pre-Primary Pre-Convention Pre-General Mid-Year Year-E	End Amendment Supplement Termination
VERIFICATION OF PERSON MAKING REPORT	County, municipal and school candidates file this statement with the person in charge of the local election.
(print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. I also understand that failure to timely file any statement, amendment, or correction required subjects the treasurer respon-	Statewide PACs, political party, ballot question and other committees file this statement with the Secretary of State's Office.
sible for filing to a civil penalty per day for each day that the statement remains delinquent. $5-23-14$	Secretary of State, Elections Department 500 East Capitol Ave., Ste 204 Pierre, SD 57501 or fax to 605-773-6580 or e-mail to cash@state.sd.us
Date  Casey Musschel  Signature of Treasurer	Fax and e-mail images must contain the signature(s) and the <b>original must be filed</b> in our office within one week following the date the fax/e-mail was received.

### **INCOME**

#### **Direct Contributions from Individuals**

Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space or you may attach additional sheets of paper.

Unitemized Contributions from Individuals	Amount
Enter total of all unitemized contributions (\$100 or less each from individuals) here:	\$
	Line item /

**Itemized Contributions from Individuals** Enter all itemized contributions (\$100 or more each from individuals) below: **Amount** Residential (Street) Address Name \$

Line item A2

\$

Itemized Contributions - Enter total of all itemized contributions (\$100 or more each from individuals):

# **Direct Contributions from Organizations**

An organization is defined as any corporate entity, partnership, association, club, labor union, or any group organized in a corporate form that is not defined as a political committee or political party. ONLY PAC's and Ballot Committee Questions may recieve direct contributions from organizations.

Vame	ions from Organizations Residential (Street) Address	Amoun
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<del> </del>		\$
	s - Enter total of all <i>itemized</i> contributions from organizations:	\$

### **Direct Contributions from Political Parties**

Name	Residential (Street) Address	Amount
		\$
×		\$
		\$ .•.
		\$
		\$
Enter total of all contribut	ions from Political Parties here:	\$ <del></del>

Line item C1

# **Direct Contributions from In-State Political Action Committees**

Name	Residential (Street) Address	Amoun
		\$ .
		\$ .
		\$ .
		\$ .
		\$ .
		\$ .
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4		\$ .
		\$ .
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		\$ .
		\$ .
		\$ .
Fatantatal of all contributi	ons from South Dakota Political Action Committees or South Dakota Candidate Co	

Line item D1

### **Direct Contributions from Out-of-State Political Action Committees**

Contributions from Fed	deral Political Action Committees		
Name	Filing Web Address		Amount
		\$	•
		\$	•
		\$	•
		\$	•
	8	\$	•
		\$	•
		\$	
	*	\$	
		\$	•
Enter total of all contribut	tions from Federal Political Action Committees or Out-of-State Candidate Com	nmittees here: \$	

Line item D2

### **Direct Contributions from Candidate Committees**

Name	Residential (Street) Address	Amount
		\$ •
		\$ •
		\$
-		\$
		\$
		\$
		\$
		\$
		\$
· ·		\$
		\$
		\$ •
		\$
		\$
		\$
		\$
		\$ •
		\$ •
Enter total of all contribution	ons from Candidate Committees here:	\$

Line item E1

#### **In-Kind Contributions**

	l and services and the estimated fair market value  Name and residential address	Ecti	Estimated value	
Description	Name and residential dadress	LStil	natea varae	
		\$	•	
		\$	•	
		\$	•	
		\$	•	
		\$		
		\$	•	
		\$		
		\$		
		\$		
		\$	•	
Enter total of all estimated in-kind of	ontributions here:	\$ -		

Line item F1

#### **Other Income**

Source of Income	Description of Income	Amount
		\$ •
		\$ •
		\$ •
Enter total of other income here:		\$

Line item G1

# **Establishing and Administering Committee/Solicitation Costs**

List a categorical description and the estimated value of funds or donations by any organization to its political committee for establishing and administering the political committee or solicitation costs of the political committee.

Organizational Name and Categorical Description for Direct Funds	Amount
	\$ •
	\$ •
	\$ •
Enter total here:	\$

Line item H1

# **EXPENDITURES**

### **Operational Expenditures**

Categories have been provided for reporting common expenses. You may list other expense items at your discretion

Campaign Expenses	Amount
Advertising	\$ •
Consulting	\$
Interest	\$
Postage	\$ 2 .
Printing	\$
Rent	\$ •
Salaries	\$
Telephone	\$
Travel	\$
Utilities	\$
List other expense items below:	\$ •
	\$
	\$
	\$
	\$
	\$ •
	\$ •
	\$
	\$ •
	\$
	\$
	\$ •
	\$
	\$
	\$ •
	\$ •
	\$
	\$
	\$
	\$
Enter total expenditures here:	\$

Line item X1

#### **Contributions Made to Candidates and Committees**

Name of Candidate or Committee	Amount
	\$ •
	\$
	\$ •
	\$
	\$
	\$
	\$
	\$
	\$ •
	\$
	\$
	\$
Enter total of contributions to candidates or committees here:	\$

Line item X2

### **Debts and Obligations Owed by Committee**

Owed to/Creditor's Name	Nature of obligation	Address	Amount
			\$
			\$
			\$
			\$

Line item X3

#### **Loans Owed to Committee**

Report the amount of each loan owed to the political committee or political party. The amount of each loan made during the reporting period and the balance of each loan owed to the committee at the end of the reporting period must be itemized.								
Name of recipient of loan, including address.		mount of loan made luring the reporting period				Balance of loan at the end of the reporting period		
	\$		\$		\$			
	\$		\$	•	\$	•		
<u> </u>	\$		\$		\$			
Enter total amount of loans owed to committee here:	\$	•	\$ -		\$-			

Line item Y1

Line item Y2

Line item Y3

# **SUMMARY OF INCOME AND EXPENDITURES**

Balance of	\$2100.29		
		T- 1	1~
		Credit	Debit
	Candidate's Personal Contribution to Own Campaign	\$ .	
la sama.		-	+
Income:	Unitemized Contributions	\$ .	
	Itemized Contributions	\$ .	
	Contributions from Candidate Committees	\$ .	
	Contributions from Organizations	\$ .	
	Contributions from Political Parties	\$ .	
	Contributions from In-State PACs	\$ .	
	Contributions from Out-of-State or Federal PACs	\$ .	
-	In Kind Contributions	\$ .	
	Other Income	\$ .	
	Expenditures from an external source to establish a committee	\$ .	
Expenditures			
Experiences	Operational Expenditures		\$ .
	Contributions to Candidates and Committees		\$ .
	Debts and Obligations Owed by the Committee		\$ .
Loan Activity			
	Monetary loan made to Candidate or Committee during reporting period	\$ .	
	Monetary loan made to Candidate or Committee repaid during reporting period		\$ .
	Monetary loan made by Committee during reporting period		\$ .
	Monetary loan repaid to Committee during the reporting period	\$ .	
Amount on hand at the end of the reporting period:		\$ 210	.29

\*Note: You cannot end the reporting period with a negative balance.

County, municipal and school candidates file with the person in charge of the local election.